Docket	No.:	

## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## INSTRUCTION FORM RETRIEVAL APPARATUS, INSTRUCTION FORM EXECUTION APPARATUS, INSTRUCTION FORM MANAGEMENT SYSTEM AND INSTRUCTION FORM RETRIEVAL METHOD described and claimed in the specification: Check one attached hereto. b. ☐ filed on September 16, 2003 as Application Serial No. (if applicable) I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56. Under Title 35 U.S. Code § 119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed within one year prior to this application are hereby claimed: Japanese Patent Application No. 2003-081354, filed on March 24, 2003 The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s): I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent and Trademark Office: James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; and Caroline D. Dennison, Reg. No.34,494. ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400. I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Typewritten Full Name of Sole or First inventor: Keiko SHIRAISHI Given Name Family Name \*\*Inventor's Signature: \*\*Date of Signature: Month Year Residence: Atsugi-shi Kanagawa Japan City State of Province Country Japan Citizenship: Room 202, 21-4, Asahicho 1-chome, Atsugi-shi, Kanagawa, Japan Post Office Address: (Insert complete mailing address, including country)

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

<sup>\*</sup>This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

<sup>\*\*</sup>Note to Inventor: Please sign name exactly as it appears above and insert the actual date of signing.

## PAGE 2 OF U.S.A. DECLARATION FORM

Typewritten Full Name of Second Joint inventor	e or:	Yasuo					TANAKA		
or become young invente	J	Given Name		Middle	Initial		Family Name		
**Inventor's Signature	:	Jaaro	Tana		minai		rainity raine		
**Date of Signature:			11		20	/	7003		
			Month		Day		Year		
Residence: Kawasaki						Japan			
	City			State of Provin	nce		Country		
Citizenship:		Japan							
Post Office Address: (Insert Complete mailing		c/o Fuji Xerox Co., Ltd., 2-1, Sakado 3-chome,							
address, including country)		Takatsu-ku, Kawasaki-shi, Kanagawa, Japan							
Typewritten Full Name of Third Joint inventor	Tomonari					YAMAUCHI			
or third John inventor.		Given Name		Middle	Initial		Family Name		
**Inventor's Signature			•	u.			Failing Name		
**Date of Signature:	•	loman	<u> </u>	famon der	20		2004		
Date of Signature.			Month		Dav		Year		
Residence:	Kawasaki-s	hi	Wionin	Kanagawa	Day		Japan		
	City			State of Provin	nce		Country		
Citizenship:	•	Japan					<b>,</b>		
Post Office Address:		c/o Fuji Xei	ox Co.	, Ltd., 2-1, S	akado 3-c	home.			
(Insert Complete mailing address, including country)				saki-shi, Kar					
Typewritten Full Name of Fourth Joint invento  **Inventor's Signature	r:	Given Name		Middle	Initial		Family Name		
· ·	•					-			
**Date of Signature:			Month	-	Day	-	Vace		
Residence:			Monui		Day		Year		
residence.	City	State of Province					Country		
Citizenship:	<b>3</b>						County		
Post Office Address:				***					
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,		<del></del>	-		<del></del>				
Typewritten Full Name of Fifth Joint inventor:									
**Inventor's Signature		Given Name Middle Initial			Family Name				
**Date of Signature:						<del></del>			
			Month		Day		Year		
Residence:									
	City	State of Province					Country		
Citizenship:									
Post Office Address: (Insert Complete mailing address, including country)									

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

<sup>\*\*</sup>Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.